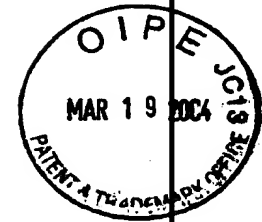




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PTO/SB/22 (08-03)  
Approved for use through 7/31/2006. OMB 0851-0031  
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. (Optional) CGR-013CP2	
In re Application of Clive ELSON <i>et al.</i>			
Application Number 09/610281-Conf. #5564		Filed July 6, 2000	
For: ADHERENT N,O-CARBOXYMETHYLCHITOSAN DRUG DELIVERY DEVICES FOR MOIST TISSUE AND METHODS OF THEIR USE			
Art Unit 1623		Examiner L. E. Crane	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |  |    |        |
|--|----|--------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))             | \$ |        |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ | 420.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))          | \$ |        |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))           | \$ |        |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))           | \$ |        |
- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0080

I have enclosed a duplicate copy of this sheet.

- I am the ☐ applicant/inventor.
- ☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☐ attorney or agent of record. Registration Number \_\_\_\_\_
- ☒ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) 29,325

March 19, 2004  
Date  
(617) 227-7400  
Telephone Number

\_\_\_\_\_  
Signature  
Ralph A. Loren  
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

<input type="checkbox"/> Total of <u>1</u> forms are submitted.
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 377 650 102 US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: March 19, 2004	Signature: <u>[Signature]</u> (Ralph A. Loren)

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